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Fill in this information to identify your case:	
Debtor 1 Dianne C. Young Debtor 2	Check if this is: ☐ An amended filing
(Spouse, if filing) United States Bankruptcy Court for the Northern District of Illinois	Chapter you are filing under: Chapter 7 Chapter 11 Chapter 12
Case number (If known)	Chapter 13

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use *you* and *Debtor 1* to refer to a debtor filing alone. A married couple may file a bankruptcy case together--called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
١.	Your full name	Dianne	N/A
	Write the name that is on your	First name C.	First name
	government-issued picture identification (for example,	Middle name Young	Middle name
	your driver's license or passport).	Last name	Last name
	Bring your picture identification to your meeting with the trustee.	Suffix (Sr., Jr., II, III)	Suffix (Sr., Jr., II, III)
2.	All other names you have	N/A	N/A
	used in the last 8 years.	First name	First name
	Include your married or maiden names.	Middle name	Middle name
		Last name	Last name
		Suffix (Sr., Jr., II, III)	Suffix (Sr., Jr., II, III)
		N/A	N/A
		First name	First name
		Middle name	Middle name
		Last name	Last name
		Suffix (Sr., Jr., II, III)	Suffix (Sr., Jr., II, III)

Deb	Case 17-05043 otor 1 Dianne C. Young	B Doc 1 Filed 02/22/17 Entered Document Page 2	d 02/22/17 09:29:32 Desc Main of 41 Case number:
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	XXX-XX-9984	N/A
4.	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years. Include trade names and doing business as names.	I have not used any business names or EINs N/A Business name N/A Business name N/A EIN N/A EIN	I have not used any business names or EINs N/A Business name N/A Business name N/A EIN N/A EIN
5.	Where you live	653 Fairview Lane Number Street South Elgin IL 60177 City, State, Zip Code Kane County If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address. N/A Number Street	If Debtor 2 lives at a different address: N/A EIN
		City, State, Zip Code	
6.	Why you are choosing this district to file for bankruptcy	Check one: No. Over the last 180 days before filing this	Check one:

- Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.
- ☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)

N/A

- Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.
- I have another reason. Explain. (See 28 U.S.C. § 1408.)

N/A

Pa	art 2: Tell the Court Al	oout	Your Ba	nkrupt	cy Case				
7.	The chapter of the Bankruptcy Code you are							<i>ruired by 11 U.S.C</i> d check the appro	. § 342(b) for Individuals Filing for priate box.
	choosing to file under		Chapter	7					
			Chapter	11					
			Chapter	12					
		\boxtimes	Chapter	13					
8.	How you will pay the fee	×	local co yourself	urt for i , you n ng you	more details ab nay pay with ca Ir payment on y	out how yoursels, cashier	u may p 's checl	pay. Typically, if k, or money orde	with the clerk's office in your you are paying the fee er. If your attorney is with a credit card or check with
			I need to	o pay i	the fee in insta to Pay Your Fil	allments. If ling Fee in I	you ch	oose this option ents (Official For	sign and attach the <i>Application</i> m 103A).
			7. By latis less to pay the	w, a jud han 15 ne fee i	dge may, but is 0% of the offici in installments)	not require al poverty li . If you cho	ed to, wa ine that ose this	aive your fee, an applies to your f option, you mus	only if you are filing for Chapter d may do so only if your income amily size and you are unable st fill out the <i>Application to</i> file it with your petition.
9.	Have you filed for bankruptcy within the last 8 years?	□ ⊠ Cas	No Yes e number <u>1</u>		Northern Dist	rict of Illin	ois	When MM/DD/YYYY	07/20/2016
		Cas	e number <u>1</u>		Northern Dist	rict of Illin	ois	When	10/19/2016
				District	N/A		. When	MM/DD/YYYY MM/DD/YYYY	Case number
10.	Are any bankruptcy		No						
	cases pending or being filed by a spouse who is		Yes	Debtor	N/A				Relationship
	not filing this case with you, or by a business partner, or by an affiliate?			District			When	MM/DD/YYYY	Case number
				Debtor	N/A				Relationship
				District			When	MM/DD/YYYY	Case number

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again.

certificate and payment plan, if any.

About Debtor 1: I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement. To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing

about credit counseling because of:

Incapacity. I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to

Active duty. I am currently on active military duty in a

military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing
about credit counseling because of:

☐ Incapacity. I have a mental illness or

a mental deficiency that makes me incapable of realizing or making rational decisions about

finances.

Disability. My physical disability

causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to

do so.

Active duty. I am currently on active

military duty in a military

combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Pa	art 6: Answer These C	luest	ions for Reporting Purpose	es					
16.	What kind of debts do you have?		 Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101 "incurred by an individual primarily for a personal, family, or household purpose." No. Go to line 16b. ★ Yes. Go to line 17. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. No. Go to line 16c. Yes. Go to line 17. State the type of debts you owe that are not consumer debts or business debts: N/A 						
17.	Are you filing under Chapter 7? Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors?			7. Do	Go to line 18. you estimate that after any exen id that funds will be available to				
18.	How many creditors do you estimate that you owe?		1-49 50-99 100-199 200-999		1,000 - 5,000 5,001 - 10,000 10,001 - 25,000		25,001 - 50,000 50,001 - 100,000 More than 100,000		
19.	How much do you estimate your assets to be worth?		\$0 to \$50,000 \$50,001 to \$100,000 \$100,001 to \$500,000 \$500,001 to \$1 million		\$1,000,001 to \$10 million \$10,000,001 to \$50 million \$50,000,001, to \$100 million \$100,000,001 to \$500 million		\$500,000,001 to \$1 billion \$1,000,000,001 to \$10 billion \$10,000,000,001 to \$50 billion More than \$50 billion		
20.	How much do you estimate your liabilities to be?		\$0 to \$50,000 \$50,001 to \$100,000 \$100,001 to \$500,000 \$500.001 to \$1 million		\$1,000,001 to \$10 million \$10,000,001 to \$50 million \$50,000,001, to \$100 million \$100,000,001 to \$500 million		\$500,000,001 to \$1 billion \$1,000,000,001 to \$10 billion \$10,000,000,001 to \$50 billion More than \$50 billion		

/s/ Jeffrey Whitehead

6280034 Bar number

02/21/2017

Part 7:	ign Below	
For you	I have examined this petition, and I declare under penalty of perjury that the information provided is true a correct.	and
	If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11, 1 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to p under Chapter 7.	
	If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b).	e fill
	I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.	
	I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.	or
	/s/ Dianne C. Young 02/21/2017 Debtor 1 MM/DD/YYYY	

For your attorney, if you are represented by one

Note that BkAssist is licensed for use only by attorneys. If you are not represented by an attorney, you may not file this petition.

I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

Attorney for Debtor(s)	MM/DD/YYYY
Jeffrey Whitehead	
Printed name	
Whitehead & Associates, LLC	
Firm name	
19 South LaSalle Street	
Number Street	
Suite 1202	
Chicago IL 60602	
City, State, ZIP Code	
312-648-0473	jeffwhitehead 2000@yahoo.com
Contact phone	Email address

Fill in this information to identify your case:	
Debtor 1 Dianne C. Young	
Debtor 2 (Spouse, if filing)	Check if this is an amended
(Spouse, II IIIIIIg)	filing
United States Bankruptcy Court for the Northern District of Illinois	· ·
Case number (If known)	

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

Pa	art 1: Summarize Your Assets	
		Your assets Value of what you own
1.	Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$210,000.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$91,650.00
	1c. Copy line 63, Total of all property on Schedule A/B	\$301,650.00
Pá	art 2: Summarize Your Liabilities	
		Your liabilities Amount you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$244,543.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$0.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$4,002.74
	Your total liabilities	\$248,545.74
Pa	art 3: Summarize Your Income and Expenses	
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$5,047.00
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22, Column A, of Schedule J.	\$4,186.55

P	art 4:	Answer These Questions for Administrative and Statistical Records	
6.	Are □	you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with schedules. Yes	n your other
7.	Wha	at kind of debt do you have? Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9 for statistical purposes. 28 U.S.C. § 159 Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check submit this form to the court with your other schedules.).
8.		m the Statement of Your Current Monthly Income (Official Form 122A-1, 122B, or 122C-1): by your total current monthly income from line 11	\$5,047.00
9.	Cop	by the following special categories of claims from Part 4, line 6 of Schedule E/F:	
Fre	m Pa	art 4 on <i>Schedule E/F,</i> copy the following:	Total claim
	9a.	Domestic support obligations (Copy line 6a.)	\$0.00
	9b.	Taxes and certain other debts you owe the government. (Copy line 6b.)	\$0.00
	9c.	Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$0.00
	9d.	Student loans. (Copy line 6f.)	\$0.00
	9e.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$0.00
	9f. [Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	\$0.00
	9g.	Total. Add lines 9a through 9f	\$0.00

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Fill in this information to identify your case:	
Debtor 1 Dianne C. Young Debtor 2 (Spouse, if filing) United States Bankruptcy Court for the Northern District of Illinois Case number (If known)	Check if this is an amended filing

Official Form 106A/B

Schedule A/B: Property

12/15

In each category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category where you think it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

	Do you own or have any legal or equitable interest in any residence, building, land, or similar property?								
		No. Go to Part 2. Yes. Where is the property?							
	1.1 653 Fairview Lane	653 Fairview Lane Street address, if available, or other description	What is the property? Check all that apply Single-family home □ Duplex or multi-unit building □ Condominium or cooperative □ Manufactured or mobile home □ Land □ Investment property	Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property.					
		South Elgin IL 60177 City, State, ZIP Code	☐ Timeshare	Current value of the entire property?	Current value of the portion you own?				
		Kane County	Other N/A Who has an interest in the property? Check	\$210,000.00	\$210,000.00				
		☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another Other information you wish to add about this item, such as local property identification number:	(such as fee simple, tenancy by the entireties, a life estate), if known. Fee Simple Check if this is community property (see instructions)						
•	Add	d the dollar value of the portion yo ries for pages you have attached f	u own for all of your entries from Part 1, ir or Part 1. Write that number here	ncluding any	\$210,000.00				
Pa	rt 2:	Describe Your Vehicles							
/eł		s you own that someone else drives.	able interest in any vehicles, whether they If you lease a vehicle, also report it on Sched						
	Car	s, vans, trucks, tractors, sport util	ity vehicles, motorcycles						
	\Box	No.							

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Deb	tor 1	C Diar	Case 17-05043 ne C. Young	Doc 1		ed 02/22/17 ocument	Entered 02/2 Page 11 of 41	2/17 09:29:32	Desc	C Main Case number:
3.1		3.1 Make: <u>Nissan</u> Model: <u>Versa</u> Year: 2014		Who has an interest in the property? Check one ☐ Debtor 1 only ☐ Debtor 2 only		Put the amount of Schedule D: Credi	Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property.			
		Appro	oximate mileage: 22,000	0 miles		Check if this is	he debtors and another community property	Current value of the entire proper	or	Current value of the portion you own?
		Otne	information:			(see instructions	5)	\$14,000	.00	\$14,000.00
4.							ional vehicles, other vessels, snowmobile			s
5.							entries from Part 2, number here			\$14,000.00
Pa	rt 3:		Describe Your Per	sonal and I	House	ehold Items				
			or have any legal o claims or exemptions)	r equitable	inter	est in any of tl	ne following items?	(List the current value of the	ne portion	ı you own. Do not
6.			old goods and furnis Major appliances, furni		hina, l	kitchenware				
		No Yes	(Basic Household (Goods; Bas	ic Ho	ousehold Good	ds and Furnshings,	D1)		\$750.00
7.	Exa						uipment; computers, pri olayers, games	nters, scanners; music		
		No Yes	(Televisions, Home	Computer	and (Cell Phone, D1	1)			\$800.00
8.	Exa	mples	les of value Antiques and figurines; seball card collections;				oooks, pictures, or other ctibles	art objects; stamp,		
	\square	No Yes								
9.	Exa	mples.	ent for sports and he Sports, photographic, e s; carpentry tools; music	exercise, and		hobby equipmen	t; bicycles, pool tables,	golf clubs, skis; canoes	i	
		No Yes								
10.		earms mples	Pistols, rifles, shotguns	s, ammunition	, and ı	related equipmer	nt			
	\square	No Yes								
11.		thes mples	Everyday clothes, furs,	, leather coats	s, desi	gner wear, shoes	s, accessories			
		No Yes	(Basic Wearing App	parel, D1)						\$1,000.00
12.	Exa	velry <i>mpl</i> es I, silve		ume jewelry,	engag	gement rings, wed	dding rings, heirloom jev	velry, watches, gems,		

Deb	tor 1	Case 17-05043 Doc 1 Filed 02/22/17 Entered 02/22/17 09:29:32 Document Page 12 of 41	Desc Main Case number:
13.	Nor	No Yes (Costume Jewelry, D1)	<u>\$25.00</u>
	Exai	nples: Dogs, cats, birds, horses No Yes	
14.	_ Any	other personal and household items you did not already list, including any health aids you not list	
	×	No Yes	
15.		I the dollar value of all of your entries from Part 3, including any entries for pages you have ched for Part 3. Write that number here	\$2,575.00
Pa	rt 4:	Describe Your Financial Assets	
		own or have any legal or equitable interest in any of the following? (List the current value of the portion laims or exemptions)	n you own. Do not deduct
16.	Cas Exampetit	mples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your	
		No Yes United States Currency (D1)	<u>\$75.00</u>
17.	Exa	posits of money apples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage ses, and other similar institutions. If you have multiple accounts with the same institution, list each.	
		No Yes Checking Account at US Bank (D1)	
18.		nds, mutual funds, or publicly traded stocks mples: Bond funds, investment accounts with brokerage firms, money market accounts	
	\square	No Yes	\$0.00
19.	Nor incl	n-publicly traded stock and interests in incorporated and unincorporated businesses, uding an interest in an LLC, partnership, and joint venture	
	\square	No Yes	\$0.00
20.	Neg	vernment and corporate bonds and other negotiable and non-negotiable instruments obtable instruments include personal checks, cashiers' checks, promissory notes, and money ordersnegotiable instruments are those you cannot transfer to someone by signing or delivering them.	
	\square	No Yes	\$0.00
21.		irement or pension accounts mples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing s	
		No Yes 401(k) Account (D1)	\$75,000.00
22.	Youi Exai	urity deposits and prepayments share of all unused deposits you have made so that you may continue service or use from a company. mples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications panies, or others	

	No Yes	\$0.00
23.	Annuities (A contract for a periodic payment of money to you, either for life or for a number of years)	
	☑ No ☐ Yes	\$0.00
24.	Interests in an education IRA as defined in 26 U.S.C. § 530(b)(1) or under a qualified state tuition plan as defined in 26 U.S.C. § 529(b)(1).	
		\$0.00
25.	Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit	
	NoYes	\$0.00
26.	Patents, copyrights, trademarks, trade secrets, and other intellectual property Examples: Internet domain names, websites, proceeds from royalties and licensing agreements	
		\$0.00
27.	Licenses, franchises, and other general intangibles Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses	
	⊠ No □ Yes	\$0.00
28.	Tax refunds owed to you Give specific information about them, including whether you already filed the returns and the tax years	
	☑ No☐ Yes	\$0.00
29.	Family support Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement	
	No ☐ Yes	\$0.00
30.	Other amounts someone owes you Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else	\$6.00
	No	\$0.00
31.	Interests in insurance policies Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance. Name the insurance company of each policy and the beneficiary, and list its value	\$0.00
	No Yes	\$0.00
32.	Any interest in property that is due you from someone who has died If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died.	
	No Yes	\$0.00
33.	Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment Examples: Accidents, employment disputes, insurance claims, or rights to sue	

Deb	tor 1	Case 17-05043 Doc 1 Filed 02/22/17 Entered 02/22/17 09:29:32 Document Page 14 of 41	Desc Main Case number:
		No Yes	\$0.00
34.		er contingent and unliquidated claims of every nature, including counterclaims of the debtor rights to set off claims	
		No Yes	\$0.00
35.	Any	financial assets you did not already list	
		No Yes	\$0.00
36.	Add atta	the dollar value of all of your entries from Part 4, including any entries for pages you have ched for Part 4. Write that number here	\$75,075.00
Pa	rt 5:	Describe Any Business-Related Property You Own or Have an Interest In. List any real e	estate in Part 1.
37.	Do y ⊠ □	you own or have any legal or equitable interest in any business-related property? No. Go to part 6. Yes. Go to line 38.	
Pa	rt 6:	Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Intellify you own or have an interest in farmland, list it in Part 1.	erest In.
46.		vou own or have any legal or equitable interest in any farm- or commercial fishing-related perty? No. Go to part 7. Yes. Go to line 47.	
Pa	rt 7:	Describe All Property You Own or Have an Interest in That You Did Not List Above	
53.	Exai	vou have other property of any kind you did not already list? nples: Season tickets, country club membership No Yes	\$0.00
54.	Add	the dollar value of all of your entries from Part 7, including any entries for pages you have ched for Part 7. Write that number here	
Pa	rt 8:	List the Totals of Each Part of this Form	
55.	Par	1: Total real estate, line 2	\$210,000.00
56.	Part	2: Total vehicles, line 5	<u>0</u>
57.	Part	3: Total personal and household items, line 15	<u>0</u>
58.	Part	4: Total financial assets, line 36	<u>0</u>
59.	Part	5: Total business-related property, line 45	-
60.	Part	6: Total farm- and fishing-related property, line 52	_
61.	Part	7: Total other property not listed, line 54	_
62.	Tota	Il personal property. Add lines 56 through 61	\$91,650.00
ลว	Tota	I of all property on Schedule A/B. Add line 55 + line 62	\$301,650,00

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Fill in this information to identify your case:	
Debtor 1 <u>Dianne C. Young</u> Debtor 2 (Spouse, if filing) United States Bankruptcy Court for the <u>Northern District of Illinois</u>	Check if this is an amended filing
Case number (If known)	

Official Form 106C

Schedule C: The Property You Claim as Exempt

04/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1:	Identify	the Property	/ You	Claim as	Exempt

- 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.
 - You are claiming Illinois Exemptions and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)

 You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- . For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own Copy the value from	Am	count of the exemption you claim Check only one box for each exemption	Specific laws that allow exemption
Residence at 653 Fairview Lane, South Elgin, 60177 (Line 1)	Schedule A/B \$210,000.00	Ø O	\$0.00 100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-901
Nissan Versa (Line 3)	\$14,000.00	⊠ □	\$420.00 100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1001(c)
Basic Household Goods (Line 6)	\$750.00	⊠ □	\$750.00 100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1001(b)
Televisions, Home Computer and Cell Phone (Line 7)	\$800.00		\$800.00 100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1001(b)
Basic Wearing Apparel (Line 11)	\$1,000.00	⊠ □	\$1,000.00 100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1001(a)
Costume Jewelry (Line 12)	\$25.00	⊠ □	\$25.00 100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1001(b)

Case 17-05043
Debtor 1 Dianne C. Young

Filed 02/22/17 Document

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Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own Copy the value from Schedule A/B	Am	ount of the exemption you claim Check only one box for each exemption	Specific laws that allow exemption
United States Currency (Line 16)	\$75.00		\$75.00 100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1001(b)
401(k) Account (Line 21)	\$75,000.00		\$75,000.00 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(b)(3)(C)
Total	\$301,650.00		\$78,070.00	
Are you claiming a homestead exemption of more than \$160,375.00? (Subject to adjustment on 04/01/2019 and every 3 years after that for cases filed on or after the date of adjustment.) No Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case? No Yes				

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Document	Page 17 of 41
Fill in this information to identify your case:	
Debtor 1 Dianne C. Young Debtor 2 (Spouse, if filing) United States Bankruptcy Court for the Northern District of Illinois Case number (If known)	Check if this is an amended filing
Official Form 106D Schedule D: Creditors Who Have C Be as complete and accurate as possible. If two married people are fill	

information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).

- Do any creditors have claims secured by your property?
 - No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form. Yes. Fill in all of the information below.

		Amount of claim Do not deduct the value of the collateral	Value of collateral that supports this claim	Column C Unsecured portion if any
.1 ranch Banking and Trust editor's Name O Box 580302 umber Street harlotte NC 28258 y, State, ZIP Code //ho owes the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt ate debt was incurred: 2005	Describe the property that secures the claim: Residence at 653 Fairview Lane, South Elgin, 60177 As of the date you file, the claim is: Check all that apply Contingent Unliquidated Disputed Nature of lien. Check all that apply An agreement you made (such as mortgage or secured car loan) Statutory lien (such as tax lien, mechanic's lien) Judgment lien from a lawsuit Other (including a right to offset) Last 4 digits of account number: 5151	\$230,963.00	\$210,000.00	\$20,963.00
.2 antander Consumer	Describe the property that secures the claim: Nissan Versa	\$13,580.00	\$14,000.00	
editor's Name O Box 105255 umber Street	As of the date you file, the claim is: Check all that apply Contingent Unliquidated Disputed			
tlanta GA 30348 y, state, ZIP Code /ho owes the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another	Nature of lien. Check all that apply An agreement you made (such as mortgage or secured car loan) Statutory lien (such as tax lien, mechanic's lien) Judgment lien from a lawsuit Other (including a right to offset)			
Check if this claim relates to a community debt ate debt was incurred: 2014	Last 4 digits of account number: -1561			

List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

1 Codilis and Associates Creditor's Name 15W030 North Frontage Road Number Street	On which line in Part 1 did you enter the creditor? 2.1 Last 4 digits of account number:
Willowbrook IL 60527 City, State, ZIP Code	

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	Document Page 1	19 01 41	
Debtor 1 Dianne C. Young Debtor 2 (Spouse, if filing) United States Bankruptcy Court for the Case number (If known)		□ Ch filir	eck if this is an amended ng
Official Form 106E/F Schedule E/F: Credit	ors Who Have Unse	cured Claims	12/15
Be as complete and accurate as possible List the other party to any executory con A/B: Property (Official Form 106A/B) and creditors with partially secured claims th needed, copy the Part you need, fill it out top of any additional pages, write your nature of the part 1: List All of Your PRIOR	tracts or unexpired leases that could res on Schedule G: Executory Contracts an at are listed in Schedule D: Creditors Wi t, number the entries in the boxes on the ame and case number (if known).	sult in a claim. Also list executory co nd Unexpired Leases (Official Form 1 ho Hold Claims Secured by Property	ontracts on <i>Schedule</i> 106G). Do not include any <i>t</i> . If more space is
Do any creditors have priority unsection No. Go to Part 2.			
Part 2: List All of Your NONPI	RIORITY Unsecured Claims		
Part 2: List All of Your NONPRIORITY Unsecured Claims 3. Do any creditors have nonpriority unsecured claims against you? ☐ No. You have nothing to report in this part. Submit this form to the court with your other schedules. ☐ Yes. 4. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3.If you have more than four priority unsecured claims fill out the Continuation Page of Part 2.			
			Total claim
4.1 Fox Valley Orthopaedic Association Nonpriority Creditor's Name 2525 Kaneville Road Number Street	Last 4 digits of account n When was the debt incur As of the date you file, th Contingent Unliquidated	rred: UNKNOWN	\$2,964.02
Geneva IL 60134 City, State, ZIP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Yes	you did not report a	out of a separation agreement or divorce the as priority claims r profit-sharing plans, and other similar debte	

		Total claim
4.2	Last 4 digits of account number: 0079	\$421.40
Labatory Physicians LLC Nonpriority Creditor's Name	When was the debt incurred: UNKNOWN	
PO Box 10200 Number Street Peoria IL 61612	As of the date you file, the claim is: Check all that apply Contingent Unliquidated Disputed	
City, State, ZIP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? NO Yes	Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Medical	
4.3	Last 4 digits of account number: 0861	\$250.75
Midwest Surgery SC Nonpriority Creditor's Name	When was the debt incurred: UNKNOWN	
2210 Dean Street #B Number Street	As of the date you file, the claim is: Check all that apply	
Trained Greet	☐ Contingent ☐ Unliquidated	
Saint Charles IL 60175	Disputed	
City, State, ZIP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Yes	Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Medical	
4.4	Last 4 digits of account number: 4439	\$318.12
Tri City Radiology Nonpriority Creditor's Name	When was the debt incurred: UNKNOWN	
300 Randall Road Number Street	As of the date you file, the claim is: Check all that apply Contingent Unliquidated Disputed.	
60134 City, State, ZIP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Yes	□ Disputed Type of NONPRIORITY unsecured claim: □ Student loans □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ Debts to pension or profit-sharing plans, and other similar debts □ Other. Specify Medical	
4.5	Last 4 digits of account number: 0079	\$48.45
Valley Emergency Care Nonpriority Creditor's Name	When was the debt incurred: UNKNOWN	
300 Randall Road Number Street	As of the date you file, the claim is: Check all that apply Contingent Unliquidated	
Geneva IL 60134 City, State, ZIP Code	Disputed	
Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Yes	Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Medical	
Is the claim subject to offset? No Yes	a Debt That You Already Listed	

Doc 1

the additional creditors here. If you do not have a this page.	you have more than one creditor for any of the debts that you listed in Parts 1 or 2, lis additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit
ah Sarvicas Inc	On which entry in Part 1 or Part 2 did you list the original creditor?
Cab Services Inc. Deditor's Name	Line <u>4.3</u> of <i>(Check one)</i> : □ Part 1: Creditors with Priority Unsecured Claims □ Part 2: Creditors with Nonpriority Unsecured Claim
10 Barney Drive	Last 4 digits of account number:
Poliet IL 60435 ity, State, ZIP Code	
<u> </u>	On which entry in Part 1 or Part 2 did you list the original creditor?
Creditors Discount & Audit Company reditor's Name	Line 4.4 of (Check one): Part 1: Creditors with Priority Unsecured Claims
15 E. Main Street	Part 2: Creditors with Nonpriority Unsecured Claim
lumber Street	Last 4 digits of account number:
Streator IL 61364 Gity, State, ZIP Code	
ily, Gale, Zir Code	
annia A. Bashara O. Associator	On which entry in Part 1 or Part 2 did you list the original creditor?
reditor's Name	Line <u>4.5</u> of <i>(Check one)</i> : ☐ Part 1: Creditors with Priority Unsecured Claims ☐ Part 2: Creditors with Nonpriority Unsecured Claim
60 Northpoint Boulevard umber Street	Last 4 digits of account number:
Vaukegan IL 60085 ity, State, ZIP Code	
	On which entry in Part 1 or Part 2 did you list the original creditor?
Vakefield and Associates reditor's Name	Line 4.1 of (Check one): Part 1: Creditors with Priority Unsecured Claims
O Box 58	Part 2: Creditors with Nonpriority Unsecured Claim
umber Street	Last 4 digits of account number:
Fort Morgan CO 80701 ity, State, ZIP Code	
	On which entry in Part 1 or Part 2 did you list the original creditor?
Vakefield and Associates	Line 4.1 of (Check one): Part 1: Creditors with Priority Unsecured Claims
Vakefield and Associates creditor's Name PO Box 441590	Line 4.1 of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claim Last 4 digits of account number:
Sily, Oldie, Zii Gode	_
044 de Add the Amounts for Each Type o	Last 4 digits of account number: Of Unsecured Claim
Vakefield and Associates PO Box 441590 umber Street Aurora CO 80044 ity, State, ZIP Code Part 4: Add the Amounts for Each Type of Add the amounts for each type of unsecured clair	Last 4 digits of account number: Of Unsecured Claim claims. This information is for statistical reporting purposes only. 28 U.S.C. §159.
5. Total the amounts of certain types of unsecured of Add the amounts for each type of unsecured claim Total claims from	Last 4 digits of account number: of Unsecured Claim claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. im.

			Total claim
			rotar olaiiii
	6c. Claims for death or personal injury while you were intoxicated	6c.	\$0.00
	6d. Other. Add all other priority unsecured claims. Write that amount here	6d.	\$0.00
	6e. Total Add lines 6a through 6d.	6e.	\$0.00
Total			
claims from Part 2	6f. Student loans	6f.	\$0.00
	6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6a.	\$0.00
	6h. Debts to pension or profit-sharing plans, and other similar debts	6h.	\$0.00
	6i. Other. Add all other nonpriority unsecured claims. Write that amount here	6i.	\$4,002.74
	6j. Total. Add lines 6f through 6i.	6j.	\$4,002.74

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Fill in this information to identify your case:	
Debtor 1 Dianne C. Young Debtor 2 (Spouse, if filing) United States Bankruptcy Court for the Northern District of Illinois Case number (If known)	Check if this is an amended filing

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.

 Yes. Fill in all of the information below even if the contracts or leases are listed on Schedule A/B: Property (Official Form 106A/B).

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Bocument 1 age	24 01 41	
Fill in this information to identify your case:		
Debtor 1 Dianne C. Young Debtor 2 (Spouse, if filing) United States Bankruptcy Court for the Northern District of Illinois Case number (If known)	☐ Check if th filing	nis is an amended
Official Form 106H Schedule H: Your Codebtors		12/15
Codebtors are people or entities who are also liable for any debts you may have people are filing together, both are equally responsible for supplying correct infill it out, and number the entries in the boxes on the left. Attach the Additional I write your name and case number (if known). Answer every question.	formation. If more space is needed, copy the	Additional Page,
4. Do you have any and history 2 /16 year and filling a light and the mat list a	-i4b - u - u - u - u - u - u - u - u - u -	

	No Yes
2.	Within the last 8 years, have you lived in a community property state or territory? (Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, and Wisconsin.) No. Go to line 3. Yes. Did your spouse, former spouse, or legal equivalent live with you at the time? No Yes. In which community state or territory did you live? . Fill in the name and current address of that person.
3.	In Column 1, list all of your codebtors. Do not include your spouse as a codebtor if your spouse is filing with you. List the person shown in line 2 again as a codebtor only if that person is a guarantor or cosigner. Make sure you have listed the creditor on Schedule D (Official Form 106D), Schedule E/F (Official Form 106E/F), or Schedule G (Official Form 106G). Use Schedule D, Schedule E/F, or Schedule G to fill out Column 2.
Со	lumn 1: Your codebtor Column 2: The creditor to whom you owe the debt

Check all schedules that apply

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Fill in this information to identify your case:	
Debtor 1 Dianne C. Young Debtor 2 (Spouse, if filing) United States Bankruptcy Court for the Northern District of Illinois Case number (If known)	Check if this is: An amended filing A supplement showing post-petition chapter 13 income as of

Official Form 106I

Schedule I: Your Income

12/15

■ Not employed

N/A

N/A

N/A

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Occupation

Employer's name

Employer's address

How long employed there?

If you have more than one job, attach a separate page with information about additional employers.

Include part-time, seasonal, or self-employed work.

Occupation may include student or homemaker, if it applies.

or			

N/A

N/A

N/A

N/A

Not employed

Part 2: Give Details About Monthly Income

			For Debtor 1	For Debtor 2 or non-filing spouse
2.	List monthly gross wages, salary, and commissions before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.	2.	\$0.00	\$0.00
3.	Estimate and list monthly overtime pay.	3.	\$0.00	\$0.00
4.	Calculate gross income. Add line 2 + line 3.	4.	\$0.00	\$0.00
5.	List All payroll deductions:			
	5a. Tax, Medicare, and Social Security deductions	5a.	\$0.00	\$0.00
	5b. Mandatory contributions for retirement plans	5b.	\$0.00	\$0.00
	5c. Voluntary contributions for retirement plans	5c.	\$0.00	\$0.00
	5d. Required repayments of retirement fund loans	5d.	\$0.00	\$0.00
	5e. Insurance	5e.	\$0.00	\$0.00
	5f. Domestic support obligations	5f.	\$0.00	\$0.00

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		<u> </u>	Document	Page 26 of 41					
						For Debto	-	For Del or non- spou	filing
	5g.	Union dues			5g.	\$0	0.00		\$0.00
	5h.	Other deductions. Specify:			5h.	\$0	0.00		\$0.00
	Add	the payroll deductions. Add lines 5a t	through 5h		6.	\$0	0.00		\$0.00
	Calc	culate total monthly take-home pay. S	Subtract line 6 from line 4.		7.	\$0	0.00		\$0.00
	List	all other income regularly received:							
	8a.	Net income from rental property and or farm	I from operating a busine	ess, profession,	8a.	\$0	0.00		\$0.00
		Attach a statement for each property at ordinary and necessary business expensions.							
	8b.	Interest and dividends			8b.	\$0	0.00		\$0.00
	8c.	Family support payments that you, a regularly receive	a non-filing spouse, or a	dependent	8c.	\$0	0.00		\$0.00
		Include alimony, spousal support, child and property settlement.	support, maintenance, div	vorce settlement,					
	8d.	Unemployment compensation			8d.	\$0	0.00		\$0.00
	8e.	Social Security			8e.	\$0	0.00		\$0.00
	8f.	Other government assistance that ye	ou regularly receive		8f.	\$0	0.00		\$0.00
		Include cash assistance and the value you receive, such as food stamps (ben Assistance Program) or housing subside	efits under the Supplemer	n assistance that ntal Nutrition					
	8g.	Pension or retirement income			8g.	\$0	0.00		\$0.00
	8h.	Other monthly income. Specify: Disa	ability Income D1 \$2,9	99.00	8h.	\$2,999	9.00		\$0.00
	Add	all other income. Add lines 8a-8h.			9.	\$2,999	9.00		\$0.00
		culate monthly income. Add line 7 + lin the entries in line 9 for Debtor 1 and De		e).		10.	\$2,99	99.00	
•		e all other regular contributions to th icial Form 106J).	e expenses that you list	in Schedule J		11.	\$2,04	18.00	
		de contributions from an unmarried parendents, your roommates, and other frie		usehold, your					
		not include any amounts already include expenses listed in <i>Schedule J</i> (Official F		that are not available to					
	•	cify: Partner's Social Security \$976 070.00	8.00; Mother-in-Law's	Social Security				_	
•	write	the amounts on lines 10 and 11. The that amount on the Summary of Your Amation (Official Form 106Sum) if it applies	Assets and Liabilities and (12.	\$5,04	17.00	
	Doy	ou expect an increase or decrease w	vithin the year after you f	ile this form?					•
	⊠ □	No Yes.							

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Fill in this information to identify your case:	
Debtor 1 Dianne C. Young Debtor 2 (Spouse, if filing) United States Bankruptcy Court for the Northern District of Illinois Case number (If known)	Check if this is: An amended filing A supplement showing post-petition chapter 13 expenses as of

Official Form 106J

Schedule J: Your Expenses

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pa	rt 1:		Describe Your Hou		Jiu					
1.	ls th	his a	joint case?							
			Go to line 2. Does Debtor 2 live in	a sep	arate household?					
			No. Yes. Debtor 2 must file	: Officia	al Form 106J-2, <i>Exp</i> e	enses for Separate House	hold of Debtor 2			
•	•		ave dependents? Debtor 1 or Debtor 2.	⊠ □	No Yes. Fill out this	Dependent's relationship to Debto	Dependent's a or	age	Does depender with you?	nt live
		not sta	ate the dependents'	П	information for each dependent	Tor Deptor 2				
		our e ender	expenses include expents?	nses o	of people other than	n yourself and your	⊠ No □ Yes			
			Estimate Your One							
	rt 2:			•	Monthly Expense		form as supplemen	tin a Ch	antar 12 casa ta r	oport
Est exp he	timate pense appl	e you es as licabl	ir expenses as your b of a date after the ba e date	pankru ankrup n-casł	uptcy filing date unlotcy is filed. If this in the governmental as	es less you are using this f s a supplemental Scheo sistance if you know the	dule J, check the b	ox at the	top of the form ar	nd fill
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Est exp the Inc Sci	timate opense appl lude opense the Ex opense the Mo The I mort finot	e you es as licabl expe ele l: Y	ar expenses as your be of a date after the base date enses paid for with nor your Income(Official Fees for property other that exed to Schedule I. If payments that are being payments and any rent to payments.	pankrup n-cash Form 1 an the cash	uptcy filing date unlotcy is filed. If this in the governmental as 106l). debtor(s)' primary resident through the Chapter ses for your resident process.	less you are using this f is a supplemental Scheon sistance if you know the sidence(s), if any, are reported	dule J, check the been asset of such asset of such asset of such asset of such asset of the summary	ox at the sistance a of Busines ses listed	top of the form are and have included ass/Real-Estate Incomon this schedule. Your expenses	nd fill i

Doc 1

			Your expenses
	4c. Home maintenance, repair, and upkeep expenses	4c.	\$125.00
	4d. Homeowner's association or condominium dues	4d.	
i.	Additional mortgage payments for your residence, such as home equity loans	5.	
	Utilities:		
	6a. Electricity, heat, natural gas	6a.	\$165.00
	6b. Water, sewer, garbage collection	6b.	\$40.00
	6c. Telephone, cell phone, Internet, satellite, and cable services	6c.	\$147.00
	6d. Other. Specify: N/A	6d.	
	Food and housekeeping supplies	7.	\$550.00
	Childcare and children's education costs	8.	
	Clothing, laundry, and dry cleaning	9.	\$140.00
0.	Personal care products and services	10.	\$150.00
1.	Medical and dental expenses	11.	\$225.00
	Transportation. Include gas, maintenance, bus or train fare. Do not include car payments.	12.	\$400.00
3.	Entertainment, clubs, recreation, newspapers, magazine, and books	13.	\$20.00
4.	Charitable contributions and religious donations	14.	\$5.00
	Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20.		
	15a. Life insurance	15a.	
	15b. Health insurance	15b.	
	15c. Vehicle insurance	15c.	\$98.00
	15d. Other insurance. Specify: N/A	15d.	
6.	Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: N/A	16.	
7.	Installment or lease payments		
	17a. Car Loan (Nissan Versa)	17a.	\$362.55
	Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, <i>Schedule I</i> (Official Form 106I)	18.	
	Other payments you make to support others who do not live with you. Specify: N/A	19.	
0.	Other real property expenses not included in lines 4 or 5 of this form or on Schedule I (Official Form 106I)		
	20a. Mortgages on other property	20a.	
	20b. Real estate taxes	20b.	
	20c. Property, homeowner's, or renter's insurance	20c.	
	20d. Maintenance, repair, and upkeep expenses	20d.	

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			Your expenses
	20f. Other. Specify:	20f.	
21.	Other. Specify: N/A	21.	
22.	Calculate your monthly expenses.		
	22a. Add lines 4 through 21.	22a.	\$4,186.55
	22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2	22b.	
	22c. Add line 22a and 22b. The result is your monthly expenses.	22c.	\$4,186.55
	23a. Copy line 12 (your combined monthly income) from Schedule I 23b. Copy your monthly expenses from line 22 above.	23a. 23b.	\$5,047.00 \$4,186.55
	23a. Copy line 12 (your combined monthly income) from Schedule I	23a.	\$5,047.00
	23c. Subtract your monthly expenses from your monthly income. The result is your monthly net income	23c.	\$860.45
24.	Do you expect an increase or decrease in your expenses within the year after you file this	form?	
	For example, do you expect to finish paying for your car loan within the year or do you expect yo because of a modification to the terms of your mortgage?	our mortgage payment	to increase or de
	No Yes. Explain		

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Fill in this information to identify your case:					
Debtor 1 Dianne C. Young Debtor 2 (Spouse, if filing) United States Bankruptcy Court for the Northern District of Illinois Case number (If known)		Check if this is an amended filing			
Official Form 106Dec Declaration About an Individual Debtor's Schedules 12/15					

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Did you pay or agree to pay someone who is NOT an attorney to help you fill out	bankruptcy forms?	
 No Yes. Name of person N/A. Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119). 		
Under penalty of perjury, I declare that I have read the summary and schedules fi are true and correct.	led with this declaration and that they	
/s/ Dianne C. Young Signature of Debtor 1	<u>02/21/2017</u> Date	
Signature of Debtor 2	02/21/2017 Date	

<u>O1</u>	Debtor 1 Dianne C. Young Debtor 2 Check if this is an amended filling Check if this is an amended filling						
info	as complete and accurate as possormation. If more space is needed, nber (if known). Answer every que	, attach a separate sheet to	o this form. On the top of	any additional pages, writ			
1.	What is your current marital ☑ Married ☐ Not married	status?					
2.	During the last 3 years, have ⊠ No □ Yes. List all of the places you		-				
3.	 Within the last 8 years, did you ever live with a spouse or legal equivalent in a community property state or territory? (Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, and Wisconsin.) ☑ No ☑ Yes. Make sure you fill out Schedule H: Your Codebtors (Official Form 106H). 						
Pa	art 2: Explain the Source	es of Your Income					
4.	Did you have any income fro years? Fill in the total amount of incompoint case and you have incompoint case and you have incomposed No ✓ Yes. Fill in the details.	ne you received from all jo	obs and all businesses, i	ncluding part-time activit	•		
		Debtor 1		Debtor 2			
		Sources of income Check all that apply	Gross income (before deductions and exclusions)	Sources of income Check all that apply	Gross income (before deductions and exclusions)		
	From January 1 of current year until the date you filed for bankruptcy:	☐ Wages, commissions, bonuses, tips☐ Operating a business		 Wages, commissions, bonuses, tips Operating a business			
	For last calendar year: (January 1 to December 31, 2016)	☐ Wages, commissions, bonuses, tips☐ Operating a business		☐ Wages, commissions, bonuses, tips☐ Operating a business			
	For the calendar year before that: (January 1 to December 31, 2015)	■ Wages, commissions, bonuses, tips ■ Operating a business	\$55,000.00	Wages, commissions, bonuses, tipsOperating a business			

5.	Did you receive any other income during this year or the two previous calendar years? Include income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1.					
	☐ No		ce and the gross income from each source separately. Do not include income that you listed in line 4.			ed in line 4.
			Debtor 1		Debtor 2	
			Sources of income Describe below	Gross income from each source (before deductions and exclusions)	Sources of income Describe below	Gross income from each source (before deductions and exclusions)
	year ur	anuary 1 of current ntil the date you r bankruptcy:	Disability Income	\$2,999.00		
	Faulas	4 colon don cons				
	(January	t calendar year: 1 to December 31, 2016)	Disability Income	\$35,000.00		
	For the calendar year before that: (January 1 to December 31, 2015)					
Pa	rt 3:	List Certain Paymer	nts You Made Before Y	ou Filed for Bankruptcy	y	
6.	Are eitl	ner Debtor 1's or Debto	or 2's debts primarily c	onsumer debts?		
	No. Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."			in 11 U.S.C. § 101(8) as		
	During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,425.00* or more?)* or more?	
	☐ No. Go to line 7.					
	Yes. List below each creditor to whom you paid a total of \$6,425.00* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.					
		* Subject to adjustmen	t on 04/01/2019 and eve	ery 3 years after that for o	cases filed on or after th	e date of adjustment.
	Ye	s. Debtor 1 or Debtor 2	or both have primarily	consumer debts.		
	During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more?					

No. Go to line 7.

include payments to an attorney for this bankruptcy case.

Yes. List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not

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Debt	Case 17-05043 for 1 Dianne C. Young	Doc 1		Entered 02/22/17 09:29 Page 33 of 41	9:32	Desc Main Case number
	Insiders include your relatives partner; corporations of which	s; any genera n you are an agent, inclu ort obligations	al partners; relatives o officer, director, perso ding one for a busines	e a payment on a debt you ower f any general partners; partnersh on in control, or owner of 20% or r as you operate as a sole proprieto art and alimony.	ips of when	nich you are a general heir voting
	Within 1 year before you file that benefited an insider? Include payments on debts go No Yes. List all payments the	uaranteed or	cosigned by an inside	e any payments or transfer any er.	propert	y on account of a debt
Pai	rt 4: Identify Legal Act	ions, Repos	ssessions, and Fored	closures		
	proceeding?	g personal in	ijury cases, small clair	arty in any lawsuit, court action		
	Case title	Nature o	of the case	Court or agency	Status	of the case
	BB&T Bank vs. Young, No. 15 CH 1311	Mortgag	e Foreclosure	Kane County Circuit Court 100 South 3rd Street Geneva, IL 60134	Judgm	ent entered
	 Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied? Check all that apply and fill in the details below. No. Go to line 11. Yes. Fill in the information below. 				garnished, attached,	
				ditor, including a bank or finan ent because you owed a debt?		itution, set off
	Within 1 year before you file of creditors, a court-appoin No ☐ Yes			our property in the possession other official?	of an as	ssignee for the benefit
Pai	rt 5: List Certain Gifts	and Contrib	outions			
	Within 2 years before you fi ☑ No ☐ Yes. Fill in the details for		kruptcy, did you give	any gifts with a total value of	more th	an \$600 per person?
	Within 2 years before you fi \$600 to any charity? ☑ No ☐ Yes. Fill in the details of			any gifts or contributions with	n a total	value of more than
Pai	rt 6: List Certain Losso	es				

Doc 1

List Certain Payments or Transfers

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15. Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft,

Case 17-05043 Dianne C. Young

fire, other disaster, or gambling?

Yes. Fill in the details

Debtor 1

Part 7:

		Yes. Fill in the details			
		Person who was paid	Description and value of any property transferred	Date payment or transfer was made	Amount of payment
		CC Advising, Inc. 703 Washington Avenue #200 Bay City, MI 48708	Fee for § 109(h)(1) briefing by approved nonprofit budget and credit counseling agency	02/22/2017	\$9.96
		Email or website address: Person Who Made the Payment if Not			
		You:			
	17.	 Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors? Do not include any payment or transfer that you listed on line 16. ☒ No ☐ Yes. Fill in the details. 			
	 18. Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs? Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement. No Yes. Fill in the details 				•
,		 Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary? (These are often called asset-protection devices.) No Yes. Fill in the details 			
	Pai	t 8: List Certain Financial Accounts,	Instruments, Safe Deposit Boxes, and Sto	orage Units	
		 Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for you benefit, closed, sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions. No Yes. Fill in the details 			
:	21.	Do you now have, or did you have within for securities, cash, or other valuables? No. No.	1 year before you filed for bankruptcy, any	safe deposit box	or other depository

Yes. Fill in the details.

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Dianne C. Young

Debtor 1

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Desc Main

Case number:

Part 12:

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Sign Below

Yes. Fill in the details below.

Include all financial institutions, creditors, or other parties.

Official Form 107

28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business?

Case 17-05043 Dianne C. Young Debtor 1

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Desc Main
Case number:

I have read the answers on this <i>Statement of Financial Affairs</i> and any attachmed answers are true and correct. I understand that making a false statement, concernated in connection with a bankruptcy case can result in fines up to \$250,000, or U.S.C. §§ 152, 1341, 1519, and 3571.	ealing property, or obtaining money or property by
/s/ Dianne C. Young	02/21/2017
Signature of Debtor 1	Date
	02/21/2017
Signature of Debtor 2	Date
Did you attach additional pages to Your Statement of Financial Affairs for Inc ☐ No ☐ Yes	dividuals Filing for Bankruptcy (Official Form 107)?
Did you pay or agree to pay someone who is not an attorney to help you fill No	out bankruptcy forms?
Yes. Name of person N/A the BkAssist software used to prepare attorneys.	are this petition is licensed for use only by

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Fill in this information to identify your case:	
Debtor 1 Dianne C. Young	
Debtor 2	Check if this is:
(Spouse, if filing)	☐ An amended filing☐ A supplement disclos
United States Bankruptcy Court for the Northern District of Illinois	additional payments of agreements as of
Case number (If known)	•

Form BKA-2030

Disclosure of Compensation of Attorney for Debtor

12/15

Use this procedural form, if desired, to disclose the matters enumerated in 11 U.S.C. § 329 and Fed. R. Bankr. P. 2016(b).

Disclosure is required within 14 days after the order for relief or another time as the court may direct. A supplemental disclosure is required within 14 days after any payment or agreement not previously disclosed.

Attach a copy of the retainer agreement, if any.

Part 1: Compensation

	For legal services, I have agreed to accept		\$4,000.00	
	Prid	or to the filing of this statement I have received Retainer for legal services	\$0.00	
		Retainer for expenses, including the court filing fee	\$310.00	
	Bal	ance Due	\$4,000.00	
2.	The	e source of the compensation paid to me was:		
		Debtor		
3.	The	source of compensation to be paid to me is:		
		Debtor ☐ Other (specify) ☑ N/A		
4.	×	I have not agreed to share the above-disclosed compensation associates of my law firm.	with any other person unless they are members and	
		□ I have agreed to share the above-disclosed compensation with another person or persons who are not members or associates of my law firm. A copy of the agreement, together with a list of the names of the people sharing in the compensation, is attached.		

Part 2:

Services

- 5. In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:
 - Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy.
 - b. Preparation and filing of any petition, schedules, statement of affairs and plan that may be required.
 - c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof.
 - d. Representation of the debtor in adversary proceedings and other contested bankruptcy matters.

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Doc 1

Debtor 1

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United States Bankruptcy Court Northern District of Illinois Chicago Division

In re. You	ng. Dianne	Case No.
III IC. I OUI	IG. Diailie	Case No.

VERIFICATION OF CREDITOR MATRIX

I(we) verify that the attached list of creditors and the matrix file to be uploaded in this case are true and complete to the best of my(our) knowledge.

/s/ Dianne C. Young	02/21/2017
Debtor	Date

Branch Banking and Trust PO Box 580302 Charlotte, NC 28258

Cab Services Inc. 90 Barney Drive Joliet, IL 60435

Chris Jewula Contracting 5200 West Roscoe Street Chicago, IL 60641

Codilis and Associates 15W030 North Frontage Road Willowbrook, IL 60527

Creditors Discount & Audit Company 415 E. Main Street Streator, IL 61364

Dennis A. Brebner & Associates 860 Northpoint Boulevard Waukegan, IL 60085

Fox Valley Orthopaedic Association 2525 Kaneville Road Geneva, IL 60134

Labatory Physicians LLC PO Box 10200 Peoria, IL 61612

Lowe's P.O. box 530914 Atlanta, GA 30353

Midwest Surgery SC 2210 Dean Street #B Saint Charles, IL 60175

Santander Consumer PO Box 105255 Atlanta, GA 30348

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Tri City Radiology 300 Randall Road Geneva, IL 60134

Valley Emergency Care 300 Randall Road Geneva, IL 60134

Wakefield and Associates PO Box 441590 Aurora, CO 80044

Wakefield and Associates PO Box 58 Fort Morgan, CO 80701